SHADY LANE NURSING CARE CENTER

1235 SOUTH 24TH STREET

MANITOWOC 54220 Phone: (920) 682-8254

Ownership: Non-Profit Corporation Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? Yes Title 18 (Medicare) Certified? Number of Beds Set Up and Staffed (12/31/02): Total Licensed Bed Capacity (12/31/02): Title 19 (Medicaid) Certified? 168 Yes Number of Residents on 12/31/02: Average Daily Census:

Services Provided to Non-Residents		agnosis of Residents (12/31/02	Length of Stay (12/31/02) %				
Home Health Care	No   Primary Diagnosis	%   Age Groups	%   Less Than 1 Year 34.8				
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Supp. Home Care-Household Services	No   Developmental Disabilit:	les 0.0   Under 65	0.6   More Than 4 Years 18.3				
Day Services	No   Mental Illness (Org./Ps	7) 40.9   65 - 74	6.1				
Respite Care	No   Mental Illness (Other)	4.3   75 - 84	35.4   100.0				
Adult Day Care	No   Alcohol & Other Drug Abı	ıse 0.0   85 - 94	18.8   *********************				
Adult Day Health Care	No   Para-, Quadra-, Hemiple	gic 0.0   95 & Over	1   Full-Time Equivalent				
Congregate Meals	No   Cancer	0.6   -	-   Nursing Staff per 100 Residents				
Home Delivered Meals	No   Fractures	1.8   1	00.0   (12/31/02)				
Other Meals	No   Cardiovascular	23.8   65 & Over	99.4				
Transportation	No   Cerebrovascular	12.2	RNs 10.2				
Referral Service	No   Diabetes	0.6   Sex	%   LPNs 5.2				
Other Services	No   Respiratory	5.5	Nursing Assistants,				
Provide Day Programming for			19.5   Aides, & Orderlies 31.9				
Mentally Ill	No	Female	30.5				
Provide Day Programming for		100.0					
Developmentally Disabled	No	1	00.0				
Supp. Home Care-Personal Care Supp. Home Care-Household Services Day Services Respite Care Adult Day Care Adult Day Health Care Congregate Meals Home Delivered Meals Other Meals Transportation Referral Service Other Services Provide Day Programming for Mentally Ill Provide Day Programming for	No   No   Developmental Disabilit: No   Mental Illness (Org./Psy No   Mental Illness (Other) No   Alcohol & Other Drug Abo No   Para-, Quadra-, Hemiples No   Cancer No   Fractures No   Cardiovascular No   Cerebrovascular No   Diabetes No   Respiratory	Les 0.0   Under 65 7) 40.9   65 - 74 4.3   75 - 84 ase 0.0   85 - 94 gic 0.0   95 & Over 0.6   - 1.8   1 23.8   65 & Over 12.2   0.6   Sex 5.5	1 - 4 Years 47.0 0.6   More Than 4 Years 18.3 6.1				

## Method of Reimbursement

	Medicare Medicaid (Title 18) (Title 19)			Other			Private Pay			Family Care			Managed Care							
Level of Care	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	o/o	Per Diem (\$)	No.	90	Per Diem (\$)	No.	0/0	Per Diem (\$)	No.	90	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	11	100.0	325	94	94.9	106	0	0.0	0	54	100.0	140	0	0.0	0	0	0.0	0	159	97.0
Intermediate				5	5.1	88	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	3.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	11	100.0		99	100.0		0	0.0		54	100.0		0	0.0		0	0.0		164	100.0

SHADY LANE NURSING CARE CENTER

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Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services,	and Activities as of 12/	31/02
Deaths During Reporting Period	1						
	1				% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	13.6	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.8	Bathing	3.0		73.8	23.2	164
Other Nursing Homes	5.1	Dressing	12.2		75.0	12.8	164
Acute Care Hospitals	74.6	Transferring	26.2		61.6	12.2	164
Psych. HospMR/DD Facilities	0.0	Toilet Use	21.3		62.8	15.9	164
Rehabilitation Hospitals	0.0		39.6		47.6	12.8	164
Other Locations	5.9	* * * * * * * * * * * * * * * * * * * *	*****	*****	*****	*******	******
Total Number of Admissions	118	Continence		%	Special Treats	ments	%
Percent Discharges To:		Indwelling Or Externa	al Catheter	6.7	Receiving Re	espiratory Care	3.7
Private Home/No Home Health	30.0	Occ/Freq. Incontinent	t of Bladder	51.8	Receiving T	racheostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent	t of Bowel	34.8	Receiving St	uctioning	0.0
Other Nursing Homes	1.7					stomy Care	1.8
Acute Care Hospitals	10.0	Mobility			Receiving To	ube Feeding	1.2
Psych. HospMR/DD Facilities	0.0	Physically Restrained	d	1.2	Receiving Me	echanically Altered Diets	29.3
Rehabilitation Hospitals	0.0						
Other Locations	9.2	Skin Care			Other Resident	t Characteristics	
Deaths	49.2	With Pressure Sores		6.7	Have Advance	e Directives	78.7
Total Number of Discharges		With Rashes		12.8	Medications		
(Including Deaths)	120				Receiving Pa	sychoactive Drugs	53.7

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Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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		Ownership:			Size:		ensure:		_		
	This		profit		-199		lled	All			
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	ilities		
	00	%	Ratio	90	Ratio	90	Ratio	%	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	98.8	92.2	1.07	85.5	1.16	86.7	1.14	85.1	1.16		
Current Residents from In-County	97.6	76.0	1.28	78.5	1.24	69.3	1.41	76.6	1.27		
Admissions from In-County, Still Residing	48.3	25.2	1.92	24.7	1.96	22.5	2.15	20.3	2.38		
Admissions/Average Daily Census	71.1	95.0	0.75	114.6	0.62	102.9	0.69	133.4	0.53		
Discharges/Average Daily Census	72.3	97.5	0.74	114.9	0.63	105.2	0.69	135.3	0.53		
Discharges To Private Residence/Average Daily Census	21.7	38.4	0.57	47.9	0.45	40.9	0.53	56.6	0.38		
Residents Receiving Skilled Care	97.0	94.3	1.03	94.9	1.02	91.6	1.06	86.3	1.12		
Residents Aged 65 and Older	99.4	97.3	1.02	94.1	1.06	93.6	1.06	87.7	1.13		
Title 19 (Medicaid) Funded Residents	60.4	63.8	0.95	66.1	0.91	69.0	0.87	67.5	0.89		
Private Pay Funded Residents	32.9	28.5	1.15	21.5	1.53	21.2	1.55	21.0	1.57		
Developmentally Disabled Residents	0.0	0.3	0.00	0.6	0.00	0.6	0.00	7.1	0.00		
Mentally Ill Residents	45.1	37.9	1.19	36.8	1.22	37.8	1.19	33.3	1.35		
General Medical Service Residents	10.4	23.0	0.45	22.8	0.45	22.3	0.46	20.5	0.51		
Impaired ADL (Mean)	47.7	49.9	0.96	49.1	0.97	47.5	1.00	49.3	0.97		
Psychological Problems	53.7	52.6	1.02	53.4	1.01	56.9	0.94	54.0	0.99		
Nursing Care Required (Mean)	6.9	6.3	1.10	6.8	1.01	6.8	1.02	7.2	0.96		